Statement of

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On behalf of

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Regarding

The Benefits of Multivitamin Use in the Aging Population

For the

White House Conference on Aging Listening Session

The Illinois Department on Aging 2004 Governor's Conference on Aging Chicago, Illinois

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Good morning, Mr. Chairman and Members of the Committee, my name is Chris Myrick from the Government Relations firm of Larson Dodd Stewart & Myrick located in Washington, D.C.

I am here today on behalf of Wyeth Consumer Healthcare, the makers of the leading multivitamin brand, Centrum. As the world and US leader in the area of multivitamin research, Wyeth believes that it has an obligation to communicate its findings about the benefits of a daily multivitamin for adults, and more specifically, the senior population. Wyeth believes that existing government university and private research shows that multivitamins are a safe, inexpensive and simple way of improving the health of the aging population.

Wyeth has noted that the annotated agenda for 2005 White House Conference on Aging published in October 2004 includes the topics of health and long term living. More specifically, healthy lifestyles, prevention and disease management will be core topics within this agenda item. I am here today to encourage this Committee to include a discussion as part of exploring these core topics, and ultimately, a recommendation, that older Americans should take a daily multivitamin.

Poor diet contributes to a myriad of major US health problems. We all know most Americans eat too much of the wrong foods and not enough of the right foods. In fact, poor diet and physical inactivity is the second leading cause of actual deaths in the US after tobacco use.²

Despite the extensive efforts of the government over the last 20 years to educate

Americans about proper diet, today 3/4s of Americans report not eating the minimum daily amount of fruits and vegetables.³ In fact, only 1% of Americans follow all of the USDA and HHS guidelines for healthy eating.⁴

Just this past August, the 2005 Dietary Guidelines Advisory Committee released its report that points out disturbing trends in America's nutrient intake. The report states that American adults, in general, do not consume enough vitamin A, C or E, nor do they get enough calcium, magnesium, potassium or fiber. This same report also points out that certain individuals, such as the elderly, need even higher levels of certain nutrients in their diets.⁵

Why do seniors present even more challenges nutritionally? As we age, our caloric intake decreases, thus our micronutrient intake decreases. In addition, as we age, our ability to absorb certain essential nutrients also decreases. These factors place the aging population at risk for deficiencies for such essentials as vitamins B₆, B₁₂, D, E, folic acid and calcium. Why are these nutrients important? Studies have shown that inadequate levels of these nutrients can contribute to the development of cardiovascular disease, various forms of cancer, osteoporosis and compromised immune status. These problems are even further magnified for those with a chronic illness or in long-term care settings.⁶

In sum, Americans, in general, are not getting all the nutrients they need through diet alone; for seniors, it is even more difficult to ensure adequate intake of all nutrients through diet alone. So what can the government do...what can Americans do? The simple answer is a daily multivitamin to supplement food intake. Not to replace food, but to supplement our diets.

Multivitamins costs pennies a day, are safe for most Americans, are accessible, and easy to use.⁷ A daily multivitamin can help ensure that Americans, and seniors in particular, get the nutrients they need to promote long-term health and, thus increase quality of life and save billions in health care costs.

I would like to share with you a summary of the latest scientific studies regarding the benefits of multivitamins. Recent scientific studies have shown that nutrient contained in multivitamins can:

- Help prevent heart disease, certain types of cancer and osteoporosis⁸
- Help reduce the rate of hip fractures in the elderly by more than 20 percent⁹
- Delay the onset of cataracts and age-related macular degeneration¹⁰
- Reduce the incidence of stroke and, possibly, Alzheimer's¹¹ 12

The diseases we've just mentioned are costly. By warding off these conditions we can not only increase the quality of life of seniors but we can dramatically reduce health care costs. In fact, a recent study by the Lewin group showed that increased use of a daily multivitamin by individuals over the age of 65 could lead to a potential \$1.6 billion cost

savings to Medicare over the next five years. This study only looked at costs associated with infections and hospitalizations due to heart attacks, as has been shown by research, many other health problems faced by the elderly could be addressed through daily multivitamin use, thus the possibility of substantial additional Medicare program savings could be realized.¹³

We believe that it is time for a government recommendation that all adult Americans, particularly seniors, take a daily multivitamin, and we urge the White House Conference on Aging to include this topic in their 2005 conference. Americans need to know what they can do to ensure optimal health and reduce their own health care costs. The government should continue to encourage them to eat right and exercise, but they should also strongly recommend a daily multivitamin.

¹ 2005 White House Conference on Aging Annotated Agenda, October 2004.

² Fletcher RH, Fairfield KM. Vitamins for chronic disease prevention in adults, clinical applications. JAMA. 2002 June 19; 287 (23):3127-29.

³ Serdula, MK, Gillespie, C. Kettle-Khan L, Farrs R, Seymour J, Denny C. Trends in Fruit and Vegetable Consumption Among Adults in the United States: Behavioral Risk Factor Surveillance System, 1994-2000. American Journal of Pub Health. 2004 Jun 94:6, 1014-1018.

⁴ USDA Center for Nutrition Policy and Promotion. Report Card of the Quality of Americans' Diets. December 2002.

⁵ 2005 HHS/USDA Dietary Guidelines.

⁶ See Fletcher, et.al.

⁷ See Blumberg

⁸ See Fletcher, et.al.

⁹ Booth SL, Broe KE, Gagnon DR, Tucker KL, Hannan MT, McLean RR, Dawson-Hughes B, Wilson PW, Cupples LA, Kiel DP. Vitamin K intake and bone mineral density in women and men. Am J Clin Nutr. 2003 Feb 77(2): 512-6.

¹⁰ Age-Related Eye Disease Study Research Group. A randomized, placebo-controlled, clinical trial of high does supplementation with vitamins C and E and beta carotene for age-related cataract and vision loss: AREDs report no.9. Arch Ophthalmology. 2001 Oct; 119(10):1439-52.

¹¹ Korczyn AD. Homocysteine, stroke, and dementia. Stroke. 2002 Oct; 33(10):2343-4.

¹² Engelhart MJ, Geerlings MI, Ruitenberg A, van Swieten JC, Hofman A, Witteman JC, Breteler MM. Dietary intake of antioxidants and risk of Alzheimer disease. JAMA. 2002 Jun 26: 287(24):3223-9.

¹³ Blumberg J, Heber D, eds. Multivitamins & Public Health: Exploring the Evidence. Summary Statement from Multivitamins & Public Health: Exploring the Evidence; October 1, 2003; Washington, DC. New York, NY: BioScience Communications; 2004.